General Pharmaceutical Council

Registered pharmacy inspection report

Pharmacy name: Pierremont Pharmacy

Address: 73 - 75 High Street, BROADSTAIRS, Kent, CT10 1NQ

Pharmacy reference: 1092575

Type of pharmacy: Community

Date of inspection: 18/03/2026

Pharmacy context and inspection background

This is a community pharmacy on a parade of shops in a largely residential area of Broadstairs. It provides NHS services such as the New Medicine Service, the Pharmacy First service, the Hypertension Case Finding service and a warfarin clinic. And it provides several services using patient group directions including, flu and travel vaccinations and a weight management service. It supplies medicines in multi-compartment compliance packs to people who need this support. And it delivers medicines to some people's homes. It also provides supervised administration of certain medicines. The pharmacy provides several face-to-face private services, including ear wax removal, aesthetics, cryotherapy and a private prescribing service.

This was an intelligence-led inspection of the pharmacy following information received by the GPhC. Not all the Standards were inspected on this occasion. The pharmacy was last inspected in March 2017. Conditions have been placed on the pharmacy since the inspection.

Overall outcome: Standards not all met

Required Action: Statutory Enforcement

Follow this link to find out what the inspections possible outcomes mean

Standards not met

Standard 1.1

- The pharmacy cannot demonstrate that it has sufficiently identified and managed the risks associated with all of its private services. It has not undertaken a risk assessment for its prescribing service. And its standard operating procedure for the service is brief, and it does not have any supporting documentation such as a prescribing policy which details the conditions it treats or medicines it supplied. This means that staff may not always be working safely in line with current best practice.

Standard 1.2

- The pharmacy does not regularly audit its clinical services including its prescribing service. Following the inspection, the pharmacy provided a copy of an undated audit received after the inspection it had undertaken about its prescribing service. But the lack of consultation records for most prescriptions seen means that it is difficult for the audit to provide the necessary assurance that the service is safe and effective. This means that the pharmacy cannot sufficiently demonstrate that it is following national guidelines or that it takes a consistent approach with all people that access the services.

Standard 1.6

- The pharmacy does not keep detailed records of all consultations for all its private services, including its prescribing service. Some consultation records were seen but they are missing important information such as medical history and safety netting. And its records about aesthetics treatments it administers do not always include key details such as the injection site or the number of units given. So, this makes it more difficult to understand the reason for the supply and the clinical evidence available at the time.

Standard 2.2

- The pharmacy cannot demonstrate that its prescriber has the appropriate training for all the pharmacy’s services. This includes the range of medicines prescribed, and identifying whether moles are benign or cancerous before treating.

Standard 4.2

- The pharmacy does not have systems in place to ensure the quality and appropriateness of all its private services. It doesn't verify information provided during consultations before supplying medicines. Additionally, the pharmacy cannot demonstrate that it obtains consent for and routinely shares information about medicines it has supplied with people’s regular prescriber.

Standards that were met with areas for improvement

Standard 4.3

- Overall, the pharmacy manages is medicines appropriately. It monitors and records its fridge temperatures, and its records are largely within the appropriate range. But it is not always clear what action the pharmacy takes if the temperatures are out of range. This means that the pharmacy may be less able to demonstrate that the medicines requiring cold storage are being stored appropriately.

Principle 1: The governance arrangements safeguard the health, safety and wellbeing of patients and the public

Summary outcome: Standards not all met

Table 1: Inspection outcomes for standards under principle 1

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
1.1 - The risks associated with providing pharmacy services are identified and managed	**Not met**	
1.2 - The safety and quality of pharmacy services are regularly reviewed and monitored	**Not met**	
1.3 - Pharmacy services are provided by staff with clearly defined roles and clear lines of accountability	Met	
1.4 - Feedback and concerns about the pharmacy, services and staff can be raised by individuals and organisations, and these are taken into account and action taken where appropriate	Standard not inspected	
1.5 - Appropriate indemnity or insurance arrangements are in place for the pharmacy services provided	Met	
1.6 - All necessary records for the safe provision of pharmacy services are kept and maintained	**Not met**	
1.7 - Information is managed to protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services	Met	
1.8 - Children and vulnerable adults are safeguarded	Met	

Principle 2: Staff are empowered and competent to safeguard the health, safety and wellbeing of patients and the public

Summary outcome: Standards not all met

Table 2: Inspection outcomes for standards under principle 2

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
2.1 - There are enough staff, suitably qualified and skilled, for the safe and effective provision of the pharmacy services provided	Met	
2.2 - Staff have the appropriate skills, qualifications and competence for their role and the tasks they carry out, or are working under the supervision of another person while they are in training	**Not met**	
2.3 - Staff can comply with their own professional and legal obligations and are empowered to exercise their professional judgement in the best interests of patients and the public	Met	
2.4 - There is a culture of openness, honesty and learning	Standard not inspected	
2.5 - Staff are empowered to provide feedback and raise concerns about meeting these standards and other aspects of pharmacy services	Standard not inspected	
2.6 - Incentives or targets do not compromise the health, safety or wellbeing of patients and the public, or the professional judgement of staff	Standard not inspected	

Principle 3: The environment and condition of the premises from which pharmacy services are provided, and any associated premises, safeguard the health, safety and wellbeing of patients and the public

Summary outcome: Standards met

Table 3: Inspection outcomes for standards under principle 3

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
3.1 - Premises are safe, clean, properly maintained and suitable for the pharmacy services provided	Met	
3.2 - Premises protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services	Met	
3.3 - Premises are maintained to a level of hygiene appropriate to the pharmacy services provided	Standard not inspected	
3.4 - Premises are secure and safeguarded from unauthorized access	Met	
3.5 - Pharmacy services are provided in an environment that is appropriate for the provision of healthcare	Standard not inspected	

Principle 4: The way in which pharmacy services, including management of medicines and medical devices, are delivered safeguards the health, safety and wellbeing of patients and the public

Summary outcome: Standards not all met

Table 4: Inspection outcomes for standards under principle 4

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
4.1 - The pharmacy services provided are accessible to patients and the public	Met	
4.2 - Pharmacy services are managed and delivered safely and effectively	**Not met**	
4.3 - Medicines and medical devices are: obtained from a reputable source; safe and fit for purpose; stored securely; safeguarded from unauthorized access; supplied to the patient safely; and disposed of safely and securely	Met	**Area For Improvement**
4.4 - Concerns are raised when medicines or medical devices are not fit for purpose	Met	

Principle 5: The equipment and facilities used in the provision of pharmacy services safeguard the health, safety and wellbeing of patients and the public

Summary outcome: Standards met

Table 5: Inspection outcomes for standards under principle 5

Standard	Outcome of individual standard	Area for improvement/ Area of good or excellent practice
5.1 - Equipment and facilities needed to provide pharmacy services are readily available	Met	
5.2 - Equipment and facilities are: obtained from a reputable source; safe and fit for purpose; stored securely; safeguarded from unauthorized access; and appropriately maintained	Standard not inspected	
5.3 - Equipment and facilities are used in a way that protects the privacy and dignity of the patients and the public who receive pharmacy services	Standard not inspected	

What do the summary outcomes for each principle mean?

Finding	Meaning
✔ Good practice	The pharmacy performs well against most of the standards and can demonstrate positive outcomes for patients from the way it delivers pharmacy services.
✔ Standards met	The pharmacy meets all the standards.
Standards not all met	The pharmacy has not met one or more standards.